गुजरात में परिवार कल्याण कार्यक्रम

534. **श्री राम सिंह राठवा** : क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) गत पांच वर्षों के दौरान गुजरात में परिवार कल्याण कार्यक्रमों के लिए निर्धारित किए गए लक्ष्यों का ब्यौरा क्या है तथा इस संबंध में प्राप्त जिलावार उपलब्धियां क्या-क्या हैं ; और

(ख) उक्त अवधि के दौरान इस कार्यक्रम के लिए राज्य को कितनी वित्तीय सहायता प्रदान की गई और इसमें से कितने प्रतिशत का उपयोग जिलेवार किया गया ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ) : (क) और (ख) गुजरात राज्य सरकार से सूचना एकत्र की जा रही है और सभा पटल पर रख दी जाएगी ।

Ayurvedic medicines with high Alcohol contents

535. SHRI N. E. BALARAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Justice Desai Commission had recommended in 1981 strict legislative measures against Ayurvedic medicines with high alcohol content, if so, what are the details of the action taken to implement the same and what are the reasons for not initiating the action;

(b) what is the number of people who have died since the Bangalore Tragedy from similar poisoning;

(c) whether there is any proposal under Government's consideration to introduce legislation for preventing the misuse of Ayurvedic medicines and banning these dangerous products; and

(d) if so, what are the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) to (d) The information is being collected and will be laid on the table of Sabha.

Sale of banned drugs

536. KUMARI ALIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a number of multi-national drug manufacturing companies in India are selling the drugs/pesticides, in open market, which are banned in the United States of America and in some European countries;

(b) if so, what are the names of these drugs and manufacturing companies; and

(c) what are the reasons for not banning these drugs/pesticides in India?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) to (c) As per information available, the drugs, namely, 'Phenformin' (an anti diabetic drug) and 'Analgin' (an analgesic-antipyretic) reported to be prohibited for sale in the United States continue to be marketed in many European countries as well as developing countries including India. The popular brands of these drugs are marketed by M/s. U.S. Vitamin and M/s Cadilla; M/s Hoechst and M/s Indian Drugs and Pharmaceuticals Ltd. respectively.

The Government have permitted continued marketing of the above drugs in consultation with medical experts and expert bodies like ICMR,

on the ground of overall favourable benefit-risk ratio.

Certain pesticides reported to have been banned in U.S.A. and certain European countries are still being used in India due to the following reasons:—

(i) Non-availability of safer/cheaper substitutes, *e.g.* DDT in Public Health.

(ii) Specific pest and disease situation.

(iii) More rapid degradation and less persistence of pesticides in Indian environmental conditions compared to countries in temperate zone.

(iv) Carefully considered use pattern recommended by Research and Extension Agencies; and

(v) Registration of pesticides for use in safer formulations.

537. [*Transferred to the 5th December*, 1991]

Introduction of two-child norm

538. MISS SAROJ KHAPARDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item entitled "two-child norm for elected office likely" which appeared in the Times of India, dated the 20th September, 1991; and

(b) if so, what are the details of the proposal and what is the response received from the State Governments in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) and (b) To impart of new thrust and dynamism to the Family Welfare Programme, a draft Action Plan has been evolved in consultation with the State Governments/Union Territories Administration. One of the important elements of this Action Plan is the proposal for developing an innovative package of incentives/disincentives for promotion of small family norm. No details have, as yet, been finalised in this regard, as the package of incentives/disincentives is proposed to be adopted through further consultations with States/UTs and other concerned Ministries/Departments in the Central Government. Many suggestions, such as making the two children norm obligatory for eligibility for elected officers are still in the consideration stage.

Deaths in Kasturba Hospital, Delhi

539. SHRI DHULESHWAR MEENA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to a news item captioned "Death stalks hospital's labour ward" which appeared in the Indian Express dated the 11th October, 1991;

(b) if so, whether it is a fact that 79 of 142 new borns have died in the MCD's Kasturba Hospital during the past few months;

(c) whether it is also a fact that the patients are being given outdated medicines by the hospital;

(d) whether Government propose to probe the working of the hospital; and

(e) if so, by when and the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND